



Vendor registration form

Vendors or service providers not required to apply for a sports betting, fantasy, esports, or route machines license, need to submit this form, which they may do electronically. Registrants must renew their registration every three (3) years or after a change in an item of this form. Type all information, answer all questions completely and respond “none” or “does not apply” if appropriate. Use attachments, if necessary, or when required to do so.

1. New registration Registration update Registration renewal

2. Name of enterprise

3. Telephone number

4. Address from which business is conducted with a licensee:

Street:

City:

County:

State:

Zip:

5. Trading as (T/A) or doing business as (D/B/A) or for services of (F/S/O):

6. Type of business to be conducted with a licensee:

7. Employer identification number: _____

8. Provide as **attachment A** a corporate or ownership chart.

9. Provide as **attachment B** the names, addresses and percentage of ownership held by each entity or person that owns more than twenty percent (20%) of this enterprise. When listing persons, also provide full dates of birth and their social security numbers.

10. Provide as **attachment C** an organizational or administrative chart.

Registration for: _____ Initials: _____

11. Provide as **attachment D** the names, residential addresses, and dates of birth of the enterprise employees who have signed a valid agreement with a licensee. Provide the same information for the enterprise employees and their immediate supervisors who will deal directly with a licensee.

12. Has the enterprise or any individual partner or stockholder been indicted, charged with, or convicted of a criminal or disorderly person offense, or been a party to or named as an unindicted co-conspirator in any criminal proceeding in any jurisdiction?

Yes **No**

If yes, include the following as **attachment E**: Nature of Case; Date of Indictment, Information or Complaint; Conviction Date; and Case Status.

13. Has the enterprise or any of the beneficial owners noted in Item 9, ever been listed as a defendant in any litigation during the past 3 years related to the gaming industry?

Yes **No**

If yes, include the following as **attachment F**: Case Name, Date and Type of Complaint, Court, and Status.

14. Has the company or any of its beneficial owners noted in Item 9, ever filed for bankruptcy during the past 7 years?

Yes **No**

If yes, provide the following as **attachment G**: Date of Filing, Court, Purpose, and Status.

15. Has the company or any of its beneficial owners noted in Item 9 ever been sanctioned by any government regulatory entity?

Yes **No**

If yes, provide the following as **attachment H**: Name of Regulatory Entity, Date of Complaint, Charge, and Status of Proceeding.

16. Has any of the beneficial owners listed in Item 9 testified before any regulatory entity?

Yes **No**

If yes, provide the following as **attachment I**: Name of Regulatory Entity, Date, Charge or Purpose, and Status of Proceeding.

17. Person who supplied this information or filled this form.

Name _____ Position/Title _____

Signature _____ Date _____

Registration for: _____ Initials: _____

To be completed by the Bureau

Approved Denied By: _____ Date: _____

Vendor number: _____

Registration for: _____ Initials: _____